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ORH-funded Study Finds Distance Most Important Barrier for Rural Veterans Seeking Care

Currently 41% of Veterans enrolled in the VA health care system reside in rural or highly rural areas of the country, therefore the VA has made improving access to care for these Veterans a top priority. Among many initiatives, the VA has expanded access to care by opening nearly 800 community-based outpatient clinics (CBOCs) around the country to provide rural Veterans with primary care, mental health care and some specialty care. ORH and the VA's Health Services Research and Development (HSR&D) service recently jointly funded a study to determine the impact of distance on the use of VA healthcare services, satisfaction, and impact on care delivery. Investigators identified study participants from 15 VA primary care clinics, including CBOCs, in 8 Midwestern states. Study surveys were completed by 96 Veterans and 88 providers/staff, and in-depth interviews were completed by 42 Veterans and 64 providers/staff. In addition, 7 focus groups were convened consisting of providers and staff. Findings included the following:

- Distance was identified as the most important barrier for rural Veterans seeking health care.
- The most common types of distance barrier discussed pertained to patient health, functioning, and financial or time resources.
- Veterans perceived the same travel distance as more burdensome when seeking care for regular services available locally when compared with specialty care.
- 44% of Veterans are 65 or older, thus travel distance is likely to become even more important as a barrier in this aging population

Citation: Buzza C, Ono S, Turvey C, Wittrock S, Noble M, Reddy G, Kaboli P, and Reisinger H. *Distance is Relative: Unpacking a Principal Barrier in Rural Healthcare*. Journal of General Internal Medicine, 2011 Nov;26 Suppl 2:648-54.

Did You Know?

- Approximately 17 million Americans, 6.2 percent of the US population, have diabetes (NIDDK, 2002).
- The prevalence of diabetes among all Veteran clinical users is much higher as compared to the general population. In 2001, the prevalence of diabetes among Veterans was nearly 20 percent (2001 VA/DoD Clinical Practice Guideline for the Management of Diabetes in Primary Care).
- Past studies have demonstrated that key quality indicators for diabetes care are better among Veterans getting some or all of their health care from VA facilities as compared to those not receiving any VA health care. (Lynch, CP et al., *Effect of Veterans Administration use on indicators of diabetes care in a national sample of Veterans*. Diabetes Technol Ther. 2010 Jun;12(6):427-33)
- Diabetes self management education is considered key in helping diabetics manage their condition. Diabetes self management includes competencies such as how to handle hyper- and hypoglycemia, medication education, self-monitoring of blood glucose, basic diet principles, sick day management and knowing when to seek further assistance.

Examination of Diabetes Care Among Rural vs. Urban Veterans

VA researchers examined a national data set based on 10,570 Veterans with Type 2 Diabetes. They found compared to urban Veterans, rural Veterans had significantly lower education, less annual income and fewer received diabetes self-management education. They also found that daily foot self-check was the only self-management behavior significantly higher among rural Veterans. Provider-based quality of care was not found to be significantly different between rural and urban Veterans. The authors suggest that even though the quality of care was equivalent between the two groups, greater efforts for patient education and support in diabetes self-management are needed for rural Veterans to improve their health outcomes. Read the entire study at Lynch, CP et al., *Disparities in diabetes self-management and quality of care in rural versus urban Veterans*. J Diabetes Complications 2011 Oct 7 (Epub).

